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22827 7590 05/15/2006  DORITY & MANNING, P.A.  POST OFFICE BOX 1449  GREENVILLE, SC 29602-1449			UG 18 200	I hereby States Po addressec transmitte	Cer certify that th	tificate of Mailing or Tra is Fee(s) Transmittal is be		
\ <b>3</b>			WA TRABEN	Sandr	a S. Pe	rkins	(Depositor's name)	
			Samuel Fular			(Signature)		
				Augus	t 15, 2	006	(Date)	
APPLICATION NO.	FILING DATE	1	FIRST NAMED INVENTOR			ATTORNEY DOCKET NO.	CONFIRMATION NO.	
10/722,581	11/24/2003	· · · · · · · · · · · · · · · · · · ·	Dan T. Simionescu 08/21/200		86 EHAILKA 48888871	- <del>10</del> 722581 <sub>5668</sub>		
FITLE OF INVENTION: TI	SSUE MATERIAL AND P	ROCESS FOR BIC	OPROSTHES:	IS	02 FC:15		70 <del>0</del> .90 OP 300.00 OP	
APPLN. TYPE	SMALL ENTITY	ISSUE FE	EE	PUBLICATION	ON FEE	TOTAL FEE(S) DUE	DATE DUE	
nonprovisional	YES	\$700	<u>r</u>	\$300		\$1000	08/15/2006	
EXAM	INER	ART UN	IT	CLASS-SUBCLASS		ORDE FURTION		
PREBILIC, PAUL B		3738	8 623-002420 RI FE 2005 FHAILF2 999999971				71 10722581	
Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).  Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.  "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.			2. For printing on the patent front printing on the patent attorneys or agents of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.  769.93 gp 308.66 up  2 Dority & Manning, P.A.					
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Please check the appropriate assignee category or categories (will not be printed on the patent): 🔲 Individual 🗀 Corporation or other private group entity 🖾 Government								
a. The following fee(s) are on the following fee(s) are on the fee with the fee (No standard Advance Order - # of	b. Payment of Fee(s):  A check in the amount of the fee(s) is enclosed.  Payment by credit card. Form PTO-2038 is attached.  The Director is hereby authorized by charge the required fee(s), or credit any overpayment, to Deposit Account Number 04-1403 (enclose an extra copy of this form).							
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Typed or printed name Christina L. Mangelsen, Patent Agent Registration No. 50,244								
his collection of information is required by 37 CFR 1.311. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) a application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and abmitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete the chief of the control of the complete of the complete of the chief of the control of the chief of the control of the chief								

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ATTORNEY DOCKET NO: CXU-378

## IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re Application of Simionescu et al.		) Examiner:	Paul B. Prebilio		
		) Art Unit:	3738		
Serial No:	10/722,581	) Confirmatio	n No: 5668		
Filed:	November 24, 2003	) ) Customer N	lo: 22827		
For: Tissue Mat Bioprosthes	erial and Process for	) <ul> <li>Deposit Acc</li> </ul>	Deposit Account No: 04-1403		

## **ISSUE FEE AND PUBLICATION FEE**

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Sir:

Respectfully submitted for filing is PTO-2038 for the issue fee due and publication fee due in the amount of One thousand dollars (\$1,000.00) for the above-identified patent.

Respectfully submitted,

DORITY & MANNING, P.A.

BY:

Christina L. Mangelsen, Patent Agent

Reg. No. 50,244

DORITY & MANNING, P.A.

P.O. Box 1449

Greenville, SC 29602-1449

(864) 271-1592

(864) 233-7342 - Facsimile

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